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CAMERON S. BURKE
CLERK
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Telephone: (208) 384-1800 Facsimile: (208) 345-3514

Attorneys for Trustee, Bernie R. Rakozy

UNITED STATES BANKRUPTCY COURT

DISTRICT OF IDAHO

In Re:

Case No. 98-02141

COMMUNITY HOME HEALTH, INC.,

Debtors.

TRUSTEE'S OPERATING BUDGET AND REPORT

Pursuant to this Court's Preliminary Order Allowing Limited Operation and Use of Cash Collateral by Trustee filed July 10, 1998, the Trustee provides the following information:



Expenses	7/11/98	7/18/98	7/26/98	8/1/98	Total	Budget
Compensation ¹	\$1,365.33	\$5,167.76	\$5,874.48	\$5,945.43	\$18,353.00	\$30,500.00 ²
Lease						\$42,000.00 ³
Insurance						\$500.00
Supplies						\$250.00
Legal Fees						\$5,000.004

As of this date the bulk of the accounting and billing tasks have been accomplished. What remains are tasks requiring: approximately 10 hours to final the Medicare cost summary; sending of remaining Medicare, Medicaid, and private billings; weekly calling and pursuing of the accounts receivable; and the completion of briefing for the administrative law hearings.

The above described tasks do not include the moving and liquidation costs for the substantial amount of office furniture and equipment which is ongoing. The Trustee is consolidating all office equipment at a warehouse at 250 N. Orchard, Boise, ID (former Union Farm and Garden property) where an auction will be held in the near future.

To date the Trustee has collected \$34,512.45 in accounts receivable and \$4,574.47 from the prepetition sale of miscellaneous furniture.

Dated this 3 day of August, 1998.

Jed W. Manwaring, Of the Firm

Attorneys for Trustee

¹ Weekly compensation reports are attached. The week ended August 1 is estimated.

² Budgeted compensation is based upon the totals of each former employee's estimates of their time left multiplied by their compensation rate.

³ Based upon a \$21,000 per month lease rate at the main offices of 1109 W. Myrtle St. Boise, ID.

⁴ Based upon Trustee's counsel's estimate of legal work related to the limited operation.

CERTIFICATE OF SERVICE

I HEREBY CERTIFY that on this 3 day of August, 1998, a true and correct copy of
the foregoing document was served by first-class mail, postage prepaid, and addressed to; by fax
transmission to; by overnight delivery to; or by personally delivering to or leaving with a person
in charge of the office as indicated below:

D. Blair Clark P. O. Box 2773 Boise, ID 83701	[] U.S. Mail [] FAX [] Overnight Delivery [] Hand Delivery
Bernie R. Rakozy P.O. Box 1738 Boise, ID 83701	[4] U.S. Mail [] FAX [] Overnight Delivery [] Hand Delivery
U.S. Trustee 304 North 8th Street Room 347 P. O. Box 110 Boise, ID 83701	[U.S. Mail FAX Overnight Delivery Hand Delivery
Randy Peterman Elam & Burke, P.A. 702 W. Idaho, 10th Fl. P. O. Box 1539 Boise, ID 83701-0539	[] U.S. Mail [] Fax [] Overnight Delivery [] Hand Delivery
Verlene Kaiser 2739 Starcrest Dr. Boise, Idaho 83712	[] U.S. Mail [] Fax [] Overnight Delivery [] Hand Delivery
Brenda Merriweather Federal Medicare Intermediary P. O. Box 9150 Oxnard, CA 93031	[4] U.S. Mail [] Fax [] Overnight Delivery [] Hand Delivery

Jed W/Manwaring

7/11/98

Contractor Name:	SSN	Hours Worke	Rate	Amount Due
Ted A. Sleight	518-76-1140	0.00	32.45	0.00
Gary A. Kittleson	068-38-9054	0.00	32.45	0.00
Charon Castanon	519-68-2027	12.00	30.28	363.36
Christine Faubion	499-52-3814	26.38	20.26	534.46
Ayn Rands	519-21-4774	7.00	13.00	91.00
Doris Rice	541-66-4601	0.00	18.50	0.00
Steve Baggerly	518-92-0795	0.00	20.19	0.00
Brenda Lake	518-25-8458	9.00	12.88	115.92
Cindy Hatcher	516-82-0014	10.57 🖍	12.88	136.14
Julie Eldred	519-90-5857	9.50	13.10	124.45
Total Hours Worked		0.00		
Total Expense			:	1,365.33

7/17/98

Contractor Name:	SSN	Hours Worke	Rate A	mount Due
Ted A. Sleight	518-76-1140	38.50	32.45	1,249.33
Gary A. Kittleson	068-38-9054	16.00	32.45	519.20
Charon Castanon	519-68-2027	37.50	30.28	1,135.50
Christine Faubion	499-52-3814	25.25	20.26	511.57
Ayn Rands	519-21-4774	12.25	13.00	159.25
Doris Rice	541-66-4601	16.25	18.50	300.63
Steve Baggerly	518-92-0795		20.19	0.00
Brenda Lake	518-25-8458	24.00 V	12.88	309.12
Debra Cathey	519-66-1808	14:50 20.5	8.00	116:00 164
Padmavathi Mudumbi	243-49-8035	19.00	8.00	152.00
Cindy Hatcher	516-82-0014	34.00	12.88	437.92
Julie Eldred	519-90-5857	17.50 🗸	13.10	229.25
Total Hours Worked		254.75		
Total Expense				5,119.76
			+	49.00
			# 3	5/67.76

7/26/98

Contractor Name:	SSN	Hours Worke	Rate	Amount Due	
Ted A. Sleight	518-76-1140	29.25	32.45	949.16	į
Gary A. Kittleson	068-38-9054	72.50	32.45	2,352.63	. 7
Charon Castanon	519-68-2027	8.00	30.28	242.24	: •
Christine Faubion	499-52-3814	21.00	20,26	425.46	; :
Ayn Rands	519-21-4774	16.00	13.00	208.00	74
- Doris Rice	541-66-4601	21.75	18.50	402.38	::
Steve Baggerly	518-92-0795	0.00	20.19	0.00	
Brenda Lake	518-25-8458	14.50	12,88	186.76 i	.,
Debra Cathey	519-66-1808	21.50	8,00	172,00	,.
Padmavathi Mudumbi	243-49-8035	22.25	8.00	178.00	
Cindy Hatcher	516-82-0014	28.50	12.88	367.08	٠,
Julie Eldred	519-90-5857	29.83	13,10	390.77	-
Total Hours Worked		285,08			
Total Expense			_	5,874.48	

8/2/98

Contractor Name:	SSN	Hours Worke	Rate	Amount Due
Ted A. Sleight	518-76-1140	33.50	32.45	1,087.08
Gary A. Kittleson	068-38-9054	41.00	32.45	1,330.45
Charon Castanon	519-68-2027		30.28	0.00
Christine Faubion	499-52-3814	25.50	20,26	516.63
Ayn Rands	519-21-4774	20.75	13.00	269.75
Doris Rice	541-88-4601	38.00	18.50	703.00
Steve Baggerly	518-92-0795	30.00	20.19	605,70
Brenda Lake	518-25-8458	24.00	12.88	309.12
Debra Cathey	519-66-1808	20.25	8.00	162.00
Padmavathi Mudumbi	243-49-8035		8.00	0.00
Linda Herrera	135-36-1395	9.00	8.00	72.00
Cindy Hatcher	516-82-0014	34.75	12.88	447,58
Julie Eldred	519-90-5857	33.75	13.10	442.13
Total Hours Worked		310.50		
Total Expense			<u>-</u>	5,945,43